## 113000078989

(Requestor's	Name)
(Address)	
(Address)	
(City/State/Z	ip/Phone #)
PICK-UP W	/AIT MAIL
(Business E	ntity Name)
(Document Number)	
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SECRETARY OF STATE

CEC - 3 2013 T. HAMPTON

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Crowder Brothers LLC  Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Justin Crowder Name of Person		
Firm/Company		
12480 Spring Hill Dr		
Spring Hill FL 34609 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Justin Crowder at (352) 584 0084  Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:		
\$25 Filing Fee \$\square\$ \$55 Filing Fee & Certified Copy		

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.50 liability company submits the following statement in order agent, or both, in the State of Florida.	to change its registered office or registered	
1. Name of the limited liability company: Crow	dr Brothers LCC	
2. (a) Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	12480 Spring Hill Dr Spring Hill Fit 34609	
(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	5ame	
5 30 13	113-78989	
3. Date of filing/registration in Florida 4	. Document number	
5. (a) Registered Agent and Registered Office shown on the	e records of the Florida Dept. of State:	
Registered Agent:	Business Filings Inc	
Registered Office Address:	515 É Park Ave Tollahouse Fr 32301	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :		
NEW Registered Agent:	Justin Crowder	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	12480 Spring Hill Dr	
	Spans Hill ,FL 3460°	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.		
Signature of a member of authorized representative of a member	2013 DEC - SECRETY TALL AHA	
Printed or typed name of signee	SSEE P	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statules relative to the proj and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to mere address, I hereby confirm that the limited liability company	• <u></u>	
Signature of Registered Agent	7 T-ll-l DI 22214	
U C Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00		